

THE CALIFORNIA HOMŒOPATH.

A Journal Devoted to the Interests of Homœopathy
on the Pacific Coast.

EDITOR, - - - - WM. BOERICKE, M. D.

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EDITORIAL.



HOMŒOPATHY has sustained a great loss in the death of two of its representatives, one after a long and successful career; the other, its most promising teacher among the younger generation of Homœopathists. The two great men were Dr. Theodor J. Rueckert, of Germany, and Prof. E. A. Farrington, of Philadelphia.

In the death of Dr. Rueckert, passed away the last of the direct students of Hahnemann and the oldest of all homœopathic physicians. He participated in the provings of drugs under Hahnemann, and was the author of that valuable work, "Klinische Erfahrungen." A thorough student, frequent contributor to journals, gifted and brilliant author and successful practitioner, he leaves a great void in homœopathic ranks, and with his departure is cut off our last connection with Hahnemann and earliest Homœopathy.

Our readers will be much pained to learn of the untimely death of Prof. E. A. Farrington, of Philadelphia. We considered Prof. Farrington to be the leading teacher of *Materia Medica* in the Homœopathic school. Receiving his inspiration and instruction direct from Hering, that giant of learning, it seemed that upon Farrington alone descended the mantle of philosophical insight into *Materia Medica* that could create a science out of material that appeared to others only chaos. His studies in *Materia Medica* are classical, and all who had the privilege of hearing him as lecturer on his favorite study, will bear testimony that he succeeded in making the hour of his lecture one of the most delightful of the day. He succeeded in making a dry subject luminous and interesting—he gave life to it, and *Materia Medica* taught by him became an intensely fascinating study. We hardly know where to look for a worthy successor.

THE Third Annual Announcement of the Hahnemann Medical College of San Francisco is published. From it we learn of a very prosperous condition of the college and good outlook for the future. The graduates of the institution are doing well and reflecting honor upon the Alma Mater. We notice several changes in the Faculty. Dr. Boericke succeeds Dr. McNeil in the chair of *Materia Medica*, and Dr. Chas. P. Hart, the former in the chair of Nervous Diseases. Dr. Hart needs no introduction as a teacher in that department; he is the well known author of the treatise on Nervous Diseases and of Intra-cranial Diseases—the only systematic works on those branches in our school. The College is greatly to be congratulated on so worthy and eminent an accession. Every homœopathic physician on the coast who is at all sensitive to the immense benefits he derives from Homœopathy and who wishes to do something for the common cause, ought to select from his acquaintance some bright young man with a love for medicine, and encourage him to pursue its study under the fostering care of the Hahnemann College of San Francisco.

ORIGINAL ARTICLES.

THE LAW OF SIMILARS.

Translated from the *La Revue Homœopathique Belge*.

By DR. W. A. DEWEY, PETALUMA.

The following are a few annotations from a new Allopathic work on Internal Pathology, recently published in Germany, and also from a few other sources, from the able pen of the editor of *La Revue Homœopathique Belge*, Dr. Martigny.

Under the heading *Ætiology*, after having enumerated the probable causes of *Tabes Dorsales*, Dr. Strumpell (the author of the above) adds: "In conclusion we ought to mention the interesting fact discovered by Tuczek, of the complete analogy which exists between *Tabes* and the phenomena produced by chronic ergotinic intoxication (Ergotism), which is likewise due to an affection of the posterior columns of the cord; anatomically verified." In continuing we were not a little surprised to find that *Ergotine* is recommended by the same author for the treatment of *Tabes*.

For a Homœopath the thing is quite natural, since *Ergotine* produces in certain subjects symptoms of *Tabes Dorsales*, with the characteristic anatomical lesions, hence there is no doubt that certain cases of *tabes* ought to be cured by *Ergotine*.

This fact did not fail to strike the mind of the author, but instead of recognizing frankly the law of similitude in this case, which would hardly do for a clinical Professor in the University of Leipsic, he tries to give an explanation, which however is very muddled. Here it is: "There is but one apparent contradiction between the existence of an ergotinic *tabes* and the fact of administering *Ergotine* as a remedy against *tabes*; it is quite possible that the drug, when given in a strong dose, provokes an atrophy of certain systems of fibers, exerts upon them an advantageous (excitant) action when it is prescribed in a less quantity."

Understand it if you can. This is what happens when one absolutely does not wish to recognize the law of similars.

M. Germain See saved himself in a similar case apropos of *Digitalis*, by a simple play on words. After having re-

marked that *Digitalis* often produced in the healthy an intermittance of the pulse, he adds: "By a singular caprice this same digitalis often causes a disappearance of this intermittancy, in those affected." By a singular caprice !!!

The facts are numerous to-day which corroborate the law of similars, and we have met sundry examples in a recent allopathic work: "*Lessons in Clinical Therapeutics*," by Dr. Dujardin-Beaumetz.

Thus he recommends *Picrotoxine* (active principle of *Cocculus*) for Epilepsy, and adds that "Chirone and Testa obtained a true artificial epilepsy by employing *Picrotoxine*." He is very careful not to attempt any explanation of this having a scientific appearance.

Apropos of Albuminuria, we also find a few verifications of the law of similars in the above work.

Speaking of the Iodide of Potassium, which should have given some success in this disease, the author makes the following remarks with reference to it: "The iodide of potash and the iodides have a direct action upon the kidney; it is eliminated by that organ, and this elimination can produce, as J. Simon has shown, a true albuminuria; it is, then, this local action which should here be the dominant question of the treatment. It is these same ideas which caused the adoption of cantharides or rather cantharidine. It is thought that the action of this alkaloid upon the Glomeruli would stimulate them and give a new vital activity to them.' *Fuchsine*, which the author likewise recommends in this disease, produces albumenuric symptoms in animals when used upon them.

With reference to the use of *Phosphorus* in the treatment of *loco-motor ataxy*, it is very interesting to read what Dr. Dujardin-Beaumetz says: "It is I who first proposed, in 1868, the employment of *Phosphorus* in the treatment of *loco-motor ataxy*. I had been preceded in this path by the works of Delpech, who had already, in 1863, applied *Phosphorus* in the treatment of certain paralyses from intoxication, and in particular by that produced by the Sulphate of Carbon. I will, of course, not mention the work of Gallavardin, who, in 1865 used this remedy in paralysis, because he used it in Homœopathic doses (what a crime!) I have since continued the

use of *Phosphorus* and although I have never observed a cure by this drug, I have seen in many cases an amelioration, characterized by increase in power and by a diminution of the incoordination.

“The same remarks made in reference to Nitrate of Silver ought to be made here, and one should ask himself if the amelioration obtained is not rather the natural cause of the disease, than the action of the remedy. Upon what is based this action of *Phosphorus* in ataxy? Here again, as in the case of Nitrate of Silver, we are reduced to hypotheses. I have put forth the following: Ranvier has shown in his experiments upon Phosphorus that when it is placed under the skin of animals, it does not provoke inflammatory phenomena, but produces an arrest of the nutritive and formative work of the histologic elements. It is possible that Phosphorus opposes thus the proliferation of nervous elements in the spinal cord. This, I repeat, is but a simple hypothesis, and I give it for what it is worth without insisting upon it.”

We think, too, that the author is perfectly right not to insist upon his pretended explanation, which in reality is not one. Why does he not declare squarely that these ameliorations produced by *Phosphorus* are in virtue of the law of similars?

The “*Scalpel*” in its turn has apprised us of a new discovery by our Allopathic confreres:

“In certain southern countries there is used a good deal of pepper in the culinary practice; with this sweet pepper there is often found mixed a strong pepper, and the consumers notice that it produces at the moment of defecation, a burning at the anus. There exists an imitation in the rectal region of the intestine an imitation which has been placed at profite *by title of substitution* to cause the disappearance of the congestions and pains accompanying Hæmorrhoidal fissure.

M. Reynier recognized that in giving two pillules of 20 centigrams each of capsicum (one in the morning and one in the evening) one could cause the painful symptoms of the affection to disappear.”—*Scalpel*, 20th Sept.

We can certify to our allopathic confreres that it is useless to give *capsicum* in doses of 20 centigrams, which will readily produce symptoms of gastric irritation; that if they will administer one drop of the mother tincture—or better still—a drop of the third or even the sixth dilution, the remedy will produce its effect, if indicated, *by title of substitution*—that is to say, by virtue of the law of similars; but it is forbidden to speak of that law in the camp of our adversaries, else you will pass for a renegade.

Patience—the facts are multiplying so much that our confreres will be forced to pass the bridge and come over to our side.

In the same number of the "*Scalpel*" there is spoken of the use of *Cimicifuga Racemosa* in accouchments, as a new discovery; the same that homœopaths have been using in tedious labors for twenty years. From work to work our allopathic brethren will finish—let us hope it for the interest of the sick—by discovering the entire therapeutics of Homœopathy.

CHRONIC SUPPURATION OF THE MIDDLE EAR.

By F. P. GREEN, M. D., O ET A. CHIR., S. F.

Mamie H., æt. 15, a frail and timid little girl, with auburn hair and blue eyes, was brought to me on account of deafness, of two years' standing, the result of scarlet fever. Her parents said that her ears had both discharged ever since this attack of sickness; that she was very sensitive, easily offended, and spent most of her time alone; took little interest in the sports that children usually enjoy, and cared little for her school-books, as they expressed it "she was very slow to learn."

I examined her ears and found both canals filled with a thick, yellow and very offensive pus. She could only hear when spoken to in a very loud tone of voice. Heard the tuning fork well, but could not hear the watch, though pressed firmly against the ear.

After thoroughly cleansing the ears, both passages were found to be filled with exuberant granulations. I desired to

make an application of bichromate of potasium, and not having a solution at hand I resorted to McIntosh battery fluid (bichromate of potash, sulphuric acid and water), it acted so satisfactorily that I continued the application every second day, until the entire canals and tympanic cavities were free from granulations, being careful to touch only the diseased tissue.

This being accomplished, the canals were packed full of a mixture of equal parts of Boracic Acid and Iodoform, when the discharge soon ceased, and both membranæ tympani, of which there remained no trace, began to fill in, and were entirely restored. The hearing rapidly improved and within three months, she could hear a watch at the distance of four feet. She came into my office one day saying, she could actually hear the mosquitoes sing, a thing she had often heard talked of, but a sound new to her.

While under my care the menstrual function was established, and she so improved in every way, that one would not recognize her as being the same person. She lost her stupid and timid appearance, enjoyed playing, took an interest in her books, and promises to be as bright as any child. The only remedy given her was sulphur 6x, which was prescribed when I first saw her and continued until the case was discharged.

INTESTINAL OBSTRUCTION.

[A paper read before the Homœopathic Club of San Francisco, by
R. H. CURTIS, M. D.]

Mr. President and Gentlemen—It is my privilege this evening to present for discussion the subject of intestinal obstruction.

Owing to the nature of our Society, and the avowed purpose of our meetings, I thought that it would be impertinent in me to attempt an elaborate paper, so I shall simply, and as briefly as possible, call your attention to a few facts connected with this very interesting subject, which no doubt have been verified in your own experience, and on which discussion may throw new light.

The unquestionable difficulties attending the diagnosis of many diseases of the abdominal viscera depends greatly on the frequent absence of definite and characteristic signs, as well as the presence of symptoms common to nearly all abdominal lesions. Of course this assertion is not meant to be so sweeping as to include renal diseases, which may by rational signs and urinalysis be diagnosed with fair precision, nor enlargement of the liver, or the opposite condition of cirrhosis, nor of growths especially those of a cancerous nature, although the absence of such definite physical signs by no means precludes the presence of grave organic disease.

In our efforts to diagnosticate abdominal lesions, we may be greatly aided by percussion and palpation, but the presence of gas, or ascitic fluid, even in small quantities, as in cancerous disease, may obscure the physical signs, as in a case with which I was myself connected, where there was a scirrhus condition of the Ileum encroaching upon and producing stenosis of the Ileo-cecal valve, inducing symptoms of intestinal obstruction, and although cancer of the intestines was suspected, the true condition was only revealed at the autopsy; there was very little thickening, and this was obscured by dropsical effusion rendering our diagnosis uncertain.

ETIOLOGY.—To give a cause of intestinal obstruction is not so easy as at first it would appear, but we may better understand the etiology by dividing the subject into two varieties, *acute* and *chronic*.

Acute.—Leaving out the different varieties of hernia manifested externally, the causes of acute intestinal obstruction are internal hernia (by which I mean hernia through a slit in the omentum, mesentery, or a fold of the peritoneum), volvulus, diverticula, knots or foreign bodies, intussusception and even worms.

Chronic intestinal obstruction may be caused by impacted fæces, tumors, or following peritonitis we may have fibrous bands or adhesions, stricture of the rectum, or it may be as well to remark here, that after the reduction of inguinal hernias of which part was omentum occlusion, has resulted from

the fact that in the first place it may have adhered to the intestinal protrusion, and from long incarceration had become indurated, so that when returned to the abdominal cavity it acted as a foreign body, and set up peritoneal inflammation.

Symptoms.—The acute variety is generally manifested by sudden and severe pain, which may be remittent or intermittent, the paroxysms varying in intensity and duration. *Vomiting*, first the contents of the stomach, then bilious, and later it becomes stercoraceous and persistent, there is obstinate constipation, and other symptoms such as usually accompany intense pain, cold sweat, pale and anxious face, accelerated pulse (there is I believe an exception in biliary colic, where the pain is often extreme yet the pulse is retarded), great exhaustion and rapid sinking of the vital forces.

Chronic intestinal obstruction may in rare cases succeed the acute, but the symptoms are generally manifested slowly, colicky pains, nausea, constipation, rumbling in the bowels, distress, and what with the gas and fecal accumulation the bowels may be easily outlined by palpation, the constipation is obstinate, the pain increases, as also the nausea, then follows vomiting, *anuria* which may be from decrease of the secreting surface, but I am inclined to think that the constant vomiting, rejecting and depleting the system of water, has much to do with it; this condition, by its poisonous effect on the nervous system, still further exhausts the patient.

DIAGNOSIS.—First the history of the case, then the symptoms objective and subjective, if the occlusion is low down, a finger in the rectum, or after carefully dilating the sphincter even the hand may be insinuated and carried as high up as the sigmoid flexure of the colon. Amussat, the famous French surgeon, judged the location from the amount of water he could inject, estimating in proportion to a given capacity of the intestines; in acute cases the presence of a tumor may indicate invagination. I find it stated that the causes of the acute variety are more frequently found in the small intestines and the chronic in the large; one point, however, seems reasonable, that is, if the cause is in the small intestines vomiting will come on sooner, and the earlier the

collapse, although the vomiting may not be markedly stercoraceous; should the occlusion be near the ileo-cecal valve, we would most likely find a swelling in the median line or a little to the right of it; in these cases the colon is usually empty, for the patient's friends, as a rule, begin treatment themselves by giving cathartics, or enemata; here we would also expect early stercoraceous vomiting, great pain and prostration. In the colon, the lower the obstruction the slower the manifestation of the symptoms, the later the fecal vomiting; perhaps if the fecal accumulation is large it could be easily felt through the abdominal walls. Age plays an important part in diagnosis, as intussusception is most common in young children; in old age there is a senile torpidity of the liver and bowels, and the old are apt to be careless and allow the fecal matter to accumulate, sometimes with disastrous results, first from hyperdistention which may lead to paresis and even permanent arrest of peristalsis; secondly from reabsorption of effete matter, and thus weighting the nervous system with its poison the torpidity is increased.

PROGNOSIS.—Always grave, but more so in the acute variety, before the doctor is called the patient's chances have usually been prejudiced by the administration of cathartics which, while they cannot overcome the obstruction, will likely induce retrostalsis and increase the prostration, the vomiting prevents nourishment, and from want of water the kidneys, the natural depurators, cease to eliminate, the blood is poisoned, the nervous system so burdened and exhausted already by pain either gives way and the patient succumbs to collapse, or inflammation sets in and winds up the scene.

The *treatment* will depend on the condition and what has already been done; the *indications* are, *first*, to allay pain and intestinal spasm, check vomiting and give the stomach rest; *secondly*, to sustain nutrition and maintain the functions of the liver, kidneys, and lungs; *third*, to overcome the obstruction.

Morphia combined with atropine given hypodermatically, will accomplish the *first*; the stomach should have nothing forced on it. Such remedies as are given, will be best given in powders or pellet form, as sometimes even a teaspoonful

of water will excite vomiting. For thirst, little pieces of ice; sometimes sips of tea are tolerated; patient should assume the horizontal decubitus, and while in that position, hot applications will tend to relieve the pain. To sustain strength such nutritive enemata as Valentine's beef extract, defibrinated blood, adding to either a little dilute hydrochlor. acid, milk and pepsin, &c.; these should be given in quantities not exceeding four ounces every three or four hours.

To remove the obstruction, copious enemata should be given three or four times a day; they may be of flaxseed tea, soap and water, hot milk, or what the judgment of the physician deems best. Of course, if the seat of the obstruction is above the ileo-cecal valve, we cannot expect much from these injections, even when the colon tube is used and the patient is placed in the knee and elbow posture.

The result to be expected from this line of treatment is by the minimum amount of medicine, relief of spasm and irregular peristalsis, the vomiting is checked or lessened in frequency; strength is conserved and supported; the antidotal effect of the atropine prevents or modifies the respiratory depression that morphia alone would produce, the rectal enemata increase renal action, which by elimination improves the mental and nervous condition; intestinal injections of water also influences the secretion of bile. This method of treatment generally results in spontaneous evacuations, but the case may be one where surgical interference will be necessary, then the advisability of laparotomy is to be thought of.

In closing these remarks, I respectfully call your attention to the subject of rectal alimentation: Dr. Fenn, of San Diego, has written an excellent article on the subject which was published in the *N. Y. Medical Record*, Aug. 15, 1885.

The surgical treatment of intestinal occlusion is admirably discussed in an article by Dr. S. B. Parsons, of St. Louis, and published in the *St. Louis Periscope*, in the October number of 1884; and an able paper by Dr. Frederick Treves, F. R. C. S., which was read before the British Medical Association at Cardiff, Wales, and reprinted in the *Medical Record*, N. Y., Aug. 15, 1885, treats the subject thoroughly and scientifically.

LIPOMA OF THE NECK.

By E. W. CHARLES, M. D.

June 3d, Ah Sing, 52 years old, consulted me for large swelling on right side of neck; said it had all grown within three months; not caused by a blow or other injury. The bunch involved the entire side of neck, extending from zygomatic fossa to the clavical. Examination developed a large "Lipoma," although such rapid growth is not common, but its mobility, doughy feel and nodulated appearance settled the diagnosis.

June 5th, came to office for its removal. Here allow me to digress to say it is a pleasure to operate on "John;" he is so stoical. Having decided on the removal, that settled the matter, and as carelessly and unconcerned as if going to bed he laid down on the operating table and took the ether without a word or the movement of a muscle. I made my incision in the line of the sterno cleido mastoid, in about the center of the body. For the benefit of students, will say why. The tumor was under the muscle in part, its posterior edge being nearly on a line with the posterior border of the sterno cleido mastoid. I would have made my incision along this posterior border, but I feared I would have to divide the muscle across its center, which would be very bad surgery, as it would have drawn apart, which would have very nicely exposed my tumor and made it so convenient to remove; but to bring these ends together and get perfect union and prevent torticollis, is another problem; so I abandoned the posterior border. Immediately under the anterior border are the carotids and internal jugular vein, with nerves, which it is well to avoid. I therefore selected the medium line, being careful to cut across as few muscular fibers as possible. After the tumor was removed, I had the normal action of the muscle to help hold my incision together. My incision extended from the mastoid process to the omo-hyoid. I tied and then severed the external jugular. Coming down to the body of the sterno cleido, I found the muscle very friable, and had no trouble in separating it with the handle of the scalpel. When the tumor came into view, I had but

little trouble in tearing out the growth, using my fingers aided by the pereosteum. After removing the tumor, which weighed half a pound, I carefully washed out the cavity until all bleeding stopped. I then applied hot antiseptic lotion—nearly boiling hot—continued the application until the raw, red surfaces changed to pink. The effect is to coagulate the albumen and thereby form a protective shield, and render the wound perfectly antiseptic, which accelerates healing, mitigates shock and reduces the chances for septicæmia to almost nothing. I closed the wound by using deep sutures of fine silver wire (my cat-gut carbolized gave out or I should have preferred it), and superficial sutures of silk. I removed the dressings in three days. Union by first intention and perfect. Removed the silk sutures, redressed, and patient progressed to perfect health without a drawback.

I will say, though of course not necessary, that my dressings, ligatures, sutures and instruments were all listerized, as no surgeon now, even for slight wounds, forgets the great advantage of listerian dressings. I will also say I believe, if surgeons will generally adopt the rule to bathe their wounds with hot listerian solution until all oozing ceases and they become glazed, they will, with the addition of the accepted listerian dressings now in vogue, have almost always perfect union by first intention. Since I have been using the hot solution I have not had a single failure. I call attention to this as I never heard of it being used by other surgeons, and I am sure if others try it they will be pleased with its results. At any rate, only by the combined efforts and opinions of the surgical profession can we come to settled conclusions. I am aware that others have used the plain hot water, but I claim that hot listerian solution is as much better than simple hot water as listerian dressing is better than the plain dressing we used years ago. Lately I have used a preparation called "Listerine," 1 to 10 of hot water. I have also used Bi-chloride of Mercury solution, 1 to 1000; 1 to 10 of hot water, and Carbolic Acid solution 1 to 40, with the water 1 to 10; but I am very partial to Listerine; it is equally effective, and non-toxic.

AN ANOMALOUS CASE OF EYE DISEASE.

By A. C. PETERSON, M. D.

On November 12th, 1885, a woman, married, about 38 years of age, presented herself at the dispensary and related a history, common enough in itself, but unusually interesting as far as the eye troubles are concerned. The patient was suffering from secondary manifestations of syphilis. At the date of her first visit the characteristic skin eruption was plain enough, and in the mouth, on the mucous surface of the under lip and on one side of the tongue were dirty, shallow, aphthous like ulcers with piled up whitish infiltrated edges. The patient had had nocturnal pains in the shafts of the long bones, buboes, etc., however the primary chancre was not noticed, but she states that six months ago, there was great irritation and itching deep in the vagina. There was a progressive failure of vision in the left eye. Externally the eye was apparently normal, the pupil a trifle dilated and vision reduced to counting fingers at five feet. There was no pain, but the ophthalmoscope revealed optic neuritis in an active stage. Congestion of the capillary vessels caused indistinctness of the outlines of the disc. There was but little haziness present indicating but little infiltration and swelling of the disc and adjacent retina. Out upon the field of the fundus, the veins were dilated and tortuous, describing the usual great curves, while the arteries were diminished in calibre and thready. Nitr. ac. 30 was prescribed, and in a week vision had increased to 30 feet, but the ophthalmoscopic appearances were little changed however. On November 23d the patient complained of an "uneasiness" in the right eye. A contracted pupil and discolored, muddy and swollen iris indicated iritis. As is frequently the case in syphilitic eye affections, there was but little attendant pain and no marked circumcorneal injection. Atropine dilated the iris except in its dependent portion, which was greatly swollen from settling of the inflammatory elements. Merc. jod. rub 3x subdued the active symptoms. The interesting point, in this case, is the specific constitutional disease affecting both eyes with such vastly different troubles. Single and double optic neu-

ritis and iritis are often observed in the above stage of syphilis, but I do not recall any similar case nor do I remember ever having heard of the coexistence of these two diseases, from a common cause. How long the optic neuritis had existed, it was impossible to ascertain exactly, except that the failure of vision was not noticed until after the appearance of the secondary symptoms spoken of. The patient has passed from under observation, but, when last seen, vision was very fair in the eye with the iritis and the other had retained the sight which it had gained.

CLINICAL ITEMS.

PERMANGANATE OF POTASH FOR OBESITY.

Commence about three hours after a meal and give grain doses, *well diluted* with water, every half hour, until four or six doses have been taken. Do the same after the next meal, and so on. Restrict the diet, and allow no water or other fluid at meal time particularly.

Dr. Bartholow strongly recommends this drug in obesity, and the relief of the disorders of digestion, which have a pathogenic relation to this malady, on the ground that the surplus and useless materials which, under existing circumstances, are transformed into fat, are oxidized and consumed and excreted as carbonic acid and water.

Syzygium Jambolanum approaches to be almost a specific for diabetes. Clinical experience gives flattering results in this disease as well as in some forms of Bright's disease.

Cinnamomum. Profuse passive menorrhagia with or without pain. *Lilium* follows well.

Fluoric Acid. Felons and suppurations around the root of the nails often yield to this remedy.

Spigelia. Beating of the heart precedes the prosopalgia, which is roused or aggravated by eating.

Sulphur. Sinking at the epigastrium; worse at about 11 A.M. in people given to habitual drunkenness.

Ferrum Sulph. Persistent incontinence of urine; could not go into company or be long from home (diurnal).

Plumbum. Rectal neuralgia; constant gnawing and drawing pain; worse toward evening and at night.

Condurango. Cracks in the corners of the mouth; dyspepsia with this symptom.

Fluoric Acid. Large patches on scalp entirely denuded of hair.

Sanguinaria. Climacteric flooding; alternate chills and flushes of heat; palpitation; gastralgia; neuralgia in left chest; slight, dry cough.

Lactic Acid. Swelling and redness of knees, which are very tender and painful; dull yet sharp pain in right knee-joint on moving leg.

Tilia. Rheumatic fever with *increasing pains just in proportion as the perspiration increases*; soreness of whole body more painful from perspiration; great thirst and decrease of urinary secretion.

Asclep. Tub. When Bryonia fails, though apparently indicated in heavy colds. Fever, headache, sore aching through chest, especially about base of lungs; sharp, stitching pains; worse from coughing or a deep breath; all worse by motion.

Brachyglottis. Constant inclination to urinate, with pain in the bladder, and renewed désiré immediately after the act. Fluttering in region of ovary.

Eucalyptus. Fl. Extr. in 20 drop doses has been used with great success in *Diabetes*, by Dr. Turner of Brooklyn. Also an *excellent* remedy for the nervous palpitation of women at change of life. Invaluable in all catarrhal conditions.

CORRESPONDENCE.

PHILADELPHIA, January 23rd, 1886.

EDITOR CALIFORNIA HOMŒOPATH: In your January number of the CALIFORNIA HOMŒOPATH, one of your contributors makes a plea for "pure minded women," impressing upon physicians the necessity of properly respecting maidenly modesty, and not violating it by submitting his patient to unnecessary local examination. In this I most heartily and fully agree with your correspondent, but I must respectfully beg leave to differ mildly with him in his recognition of which is the "pure minded" woman, the one who is overcome with "shame and mortification" at such examination, or the one who realizing its necessity yields gracefully; not only for the sake of her present health and happiness, but also for the *absolute duty* she owes to her future husband and children, that she keep not only her spirit pure and whole, but her body also. In the sphere of this thought no such unclean feeling as "shame and mortification" can obtrude. Of course there is naturally some degree of nervousness, owing largely to the weak and diseased state of her body, but under the influence of a "pure minded physician" who is in a true love of his profession, this can be entirely overcome. Silly girls, improperly educated, with impure thoughts on the whole subject of wifedom and motherhood, may allow themselves to be carried away by hysteria or some other like nervous prostration, but the noble minded pure maiden, who has a *true* appreciation of womanly modesty could never be so afflicted. The physician must remember though, how much—how very much, depends upon himself; if he approaches his patient with the feeling that such examination is a "dese-cration to her delicacy" she will unconsciously be affected by that thought, and then indeed is it an outrage to her womanhood, and intuitively will she perceive his unfitness for his great and high calling. If, under the faulty system of female education of the present day (concerning which Dr. Wm. Goodell speaks so thoroughly to the purpose, in the same number of your journal), girls are improperly educated by weak and ignorant mothers, it becomes the physician's great privilege to be able to help to correct so great a wrong done not only to the girls themselves, but the generations following. "Honi soit qui mal y pense."

A WOMAN.

IN reply to a communication from "A Subscriber," requesting information through these pages, we will mention the following remedies in treatment of Spinal Neuralgia: Acon., Cimicif., Hypericum, Hura. With reference to skin diseases, we recommend consultation in person with a good homœopathic physician.

GALT, CAL.

PLEASE send a Homœopathic Physician to Galt. If there is none, please let me know and I will send East for one. In so doing you will greatly oblige

EDITOR CALIFORNIA HOMŒOPATH :—During a visit of several weeks duration in our sister city of Los Angeles, I had ample opportunity to watch the unusual development and the firm footing of Homœopathy in that section of our favored State. It is not too much to say that, compared with the population, Los Angeles has the largest homœopathic element of any city on this coast. I was not only surprised to find this condition of things, but felt elated over this rapid growth.

It foreshadows the position which the Homœopathic School will hold on this coast in the future, and is good cause for rejoicing and gratification, giving decided encouragement to the work mapped out by our college.

Homœopathic physicians there are numerous, and the majority, I am happy to say, are doing well. They have a County Society, which has been in operation for some time, and bids fair to become a useful institution. In fact, it cannot fail to become so, for there is an excellent body of practitioners in that city, and if the best men will work harmoniously, we will doubtless often hear of their labors in the direction of an advance in the interests of homœopathy. A report of the last annual meeting was promised me, but not having come to hand yet, I fear it will come too late for this number of the CALIFORNIA HOMŒOPATH.

The very cordial reception accorded me by the majority with whom I came in contact will ever remain a grateful remembrance.

Sincerely, E. A. SCHRECK.

THE AMERICAN INSTITUTE OF HOMŒOPATHY.

The General Secretary has the pleasure to announce to the members of the Institute, and to the profession generally, that the next session of this great national and influential body of physicians will convene at Saratoga Springs, N. Y., the last Tuesday (29th day) of June next, at 10 o'clock A.M., and continue in session *four* days, or longer should the interests and business of the Institute require it. The local committee of arrangements has contracted with the proprietor of the "Grand Union Hotel" (in one of the large parlors of which the meetings will be held), to entertain the members of the Institute, and others who may attend the meeting, at reduced rates, and in a style unsurpassed. The reasonable anticipation of an unusually large attendance has alone enabled the committee to secure the advantages obtained. It is confidently hoped that its liberal arrangements will be appreciated. In addition to the attractions of the place, the national reputation of the hotel, and the favorable time fixed for the meeting; the other inducements to attend this great conclave should not be underrated. The various bureaus (fourteen in number), embracing every department in medical science and art, are fully organized and resolved to present original and valuable reports. Ample time will be given for a full discussion of these reports, which will contribute largely to the interest and value of the proceedings. A programme of the order of business and a circular giving all possible information in regard to hotel rates, railroad fares, entertainments, etc., will be issued about the first of June.

Blank applications for membership can be obtained from R. B. Rush, M. D., Chairman of Board of Censors, 120 Main street, Salem, Ohio, or of the General Secretary, 960 Penn Avenue, Pittsburg, Pa.

J. C. BURGHER, General Secretary.

Personal Notes, Locations, Etc.

A LOS ANGELES subscriber wishes to know something about the use of Hydrastis in catarrh. As probably no remedy is used more, both locally and internally, and as the information can be found in every homœopathic text-book, no further information need to be given here.

MRS. M. E. EDMONDS, M. D., has opened an office at 324 Sutter street. We rejoice in this new accession of a thoroughly reliable lady physician to our ranks, and as good lady physicians practising homœopathy are few and far between, we feel sure DR. EDMONDS will succeed.

We are glad to learn that E. R. BALLARD, M. D., has associated himself with DR. W. H. LOOMIS, of Alameda. This city offers a good field, and the doctor will doubtless build up a good practice.

OF the twenty-five women practising medicine in England, eight have become insane, showing the terrible strain of professional life upon their sensitive nervous organism.

DR. BENJ. P. WALL, of Berkeley, has been very ill, largely due to overwork, and constant self-sacrificing care of his patients. Though far from well the doctor has sufficiently recovered to be about, and we sincerely hope that renewed health and strength will soon be his in a large measure.

WE have just learned that R. CARTWRIGHT, M. D. has established himself as physician and surgeon at Grass Valley. This place is an important mining town, and although one representative of our school has been located there for a number of years we believe that the population is more than enough to support two homœopathists nicely.

MRS. T. C. ENNEVER, Sierra Madre, Los Angeles Co., Cal. wishes to obtain a full report of the Thirty-fifth annual meeting of the New York State Homœopathic Society. Will the Secretary accommodate her, as well as the editor of the CALIFORNIA HOMŒOPATH?

DR. E. C. FRANKLIN, formerly professor of Surgery in the St. Louis Homœopathic College, and author of several works, died suddenly at his old home in St. Louis. Professor Franklin ranked among the leading surgeons in the country.

DR. E. HASBROUK, of Brooklyn, N. Y., is the Secretary of the American Obstetrical Society. He writes that the Society had a royal meeting on December 10th, about 150 in attendance. The Society has now just 150 members, scattered *all over*. He wants members from the Pacific Coast. We hope every physician, especially interested in that branch of Medicine, will join the Society. Next meeting will be February 25th.

WE take pleasure in calling the attention of our physicians throughout the coast to the card of Dr. G. E. Davis, of this city. The doctor has prepared himself for his specialty by recent study in New York hospitals.

DR. P. HOWE, of Pomona, Los Angeles County, writes that he has taken Doctor CRANSH, formerly of Los Angeles, as partner. We hope the new firm will succeed.

A GOOD homœopathic veterinary surgeon is wanted in San Francisco. If the right man would settle here, there is no doubt of his having enough business from the start.

NEW PUBLICATIONS.

A System of Medicine Based upon the Law of Homœopathy. Edited by H. R. ARNDT, M. D. In 3 volumes. Vols. I and II. Philadelphia: The Hahnemann Publishing House. F. E. Boericke, 1885.

If it must needs be that the Homœopathic School should have systematized works on Practice instead of adhering to the ideal of the school, and rely entirely on the Materia Medica, with its repertories—if it must be that we cannot rest satisfied with such suggestive treatises like Raue and Hughes, but must have treatises on pathology and therapeutics, all our own, even though we draw largely from old-school authorities to do so; if it is necessary to do all this in order to draw attention to the superior advantages we Homœopathists enjoy over our brethern of the old-school, in the treatment of disease, why it certainly is a matter of congratulation that we have so wise an editor as Dr. Arndt, and so learned a set of contributors as those who figure in these two volumes. And it is an advantage, too, to imitate the methods of Reynolds, Pepper, and Ziemssen, and issue a series of essays on special subjects by special students. We gain thereby the advantage of having the result of large experience of representative men, our work gains in breadth, though we necessarily miss from it *literary* evenness and merit. But this is a minor defect. Some of the best chapters of Volume I. are contributed by the editor himself—we refer especially to his chapters on Diseases of the Stomach. Volume II. introduces us to diseases of the Genito-urinary organs, and here those contributed by Dr. Winterburn, are especially admirable. His explanation of menstrual derangements are very clear, and the therapeutic indications precise and practical. In the department of Nervous diseases we miss singularly enough an article on Epilepsy. Perhaps the domain of Surgery is invaded too much at times by different authors, though we suppose this has been done to show the specific homœopathic treatment we have for these affections over and above the purely surgical and mechanical. Considering the magnitude of the work we are surprised at its uniform excellency and comparatively few shortcomings, and we cannot but endorse it, and recommend it most heartily to the homœopathic physician as a work not only for his library but one for his office table, where it will be consulted very fre-

quently, and if its influence is, as we hope, not to put the *Materia Medica* on the shelves, but have it referred to even more frequently, we are entirely satisfied with this most ambitious Homœopathic Work on Practice. It is needless to add that the publisher has done his best; it is faultlessly gotten up.

Milk Analysis and Infant Feeding. A Practical Treatise on the examination of Human and Cow's Milk, Cream, Condensed Milk, &c., and directions as to the diet of young infants. By A. V. MEIGS, M. D. Philadelphia: P. Blackiston, Son and Co., 1885.

This little volume supplies a real want, giving to the busy practitioner a treatise, as the title indicates, on a subject of great importance. The author, after a long and careful study of the matter, is convinced that human milk contains a very much less quantity of casein than is commonly attributed to it, puts forth his reasons and a detail of the methods by which the conclusions were attained. But it seems to us that he feeds his babies too often in the night. That is surely bad habit. An excellent Bibliography is appended.

Transactions of the Homœopathic Medical Society of the State of Pennsylvania. Twenty-first Annual Session. 1885.

The Publishing Committee of this Society have kindly sent us a copy of the above transactions. [Couldn't they furnish back volumes as well? The most enjoyable article in the volume is by Dr. C. G. Raue, on the symptomatic treatment of disease. It is written in the Doctor's happiest vein. Dr. Fornia's article on Exotic Drugs, for provings, makes us shudder to think of the possible accessions to our *Materia Medica*. Hold on with thy blessings. We have a lot of Pacific coast plants to offer "for proving" to any one ambitious in that direction. They are doing good work in Homœopathy in Pennsylvania, and they are all reaping their reward, and even we out here get some benefit of their enthusiastic upholding of the banner of Homœopathy.

Dr. Schuessler's Biochemical Treatment. New Translation of 12th German Edition. Translated with the addition of a repertory by J. T. O'CONNOR, M. D. Philadelphia: F. E. Boericke, 1885.

There have been several editions of Schuessler's abridged *Therapeutics*, founded on Histology and Cellular Pathology. This, the latest and from the last German edition, shares the faults of all the others, namely the want of a *good index*. Indeed in that particular, if not in general appearance, it hardly compares with the translation by Dr. Walker, published in England. Schuessler's Twelve Tissue remedies are valuable, and *when proven*, as some of them are, will be polychrests, no doubt. Even used empirically, according to Schuessler's theory, they fill a niche, and therefore a good and full index is a great desideratum. Get it up for the next edition, which we hope will be before the year is out.

The Value of Vaccination. A non-partisan review of its history and results by G. W. Winterburn, Ph. D., M. D. Philadelphia: F. E. Boericke, 1886.

We have learned more from this little volume on the subject of vaccination in one hour's reading than we ever knew from past reading. It is the clearest,

fairest, most scientific treatise on a most important subject, free from party feeling, and scholarly in its presentation. Every physician *and layman* should read this Essay of Dr. Winterburn's, and then decide, and not until then, about his attitude towards vaccination. The publisher informs us in a note that before deciding to publish it, the manuscript was read by two physicians, directly opposed in their views on vaccination. Both agreed that it was a most interesting and exhaustive treatise, with not a dull page in it, and so do we. Let every one procure it and judge for himself.

Some Fever Experience. By C. Mohr, M.D. A paper read before the Homœopathic Medical Society of Pa. Tennessee State Board of Health Bulletin, December, 1885.

MISCELLANEOUS.

TAKE NOTICE.

All money for subscriptions should be sent direct to the *publishers*, and not to the *Editor*. Unfortunately his reward is supposed to be of a less material kind. Advertisements also should be sent to the *publishers* rather than to the editor; whereas all articles for insertion, exchanges and books for review ought to be sent to the *Editor*.

No. 2 of the CALIFORNIA HOMŒOPATH is not sent to any but bona fide subscribers. If by chance non-subscribers do get it, it means an invitation to join the ranks of the supporters of California Homœopathy, and therefore please send on your subscription.

A NEW DEPARTURE.

We wish to announce to our patrons that we intend putting upon the market a "Kumyss" that will meet the taste of the most fastidious, and will become, we hope, one of the most, if not *the most*, important dietetic preparation yet offered to invalids and to the public generally.

There is not space left us here to enter upon the merits of such a preparation; suffice it to say that the profession have

long ago recognized its value. This Kumyss will be made under our personal supervision, just so soon as the necessary facilities have been secured, which, we expect, will be before the next number of this Journal makes its appearance.

BOERICKE & SCHRECK.

VETERINARY HOMŒOPATHY is gaining ground daily in our State, and during Mr. Schreck's visit at Los Angeles he had the pleasure of becoming acquainted with Mr. N. T. Blair, proprietor of the Los Angeles Sales Stables and Infirmary, who for some time past has treated all horses entrusted to his care with homœopathic medicines, meeting with most unexampled success when compared with the old method. We rejoice in this additional testimony to the efficacy of homœopathic treatment, and in the extended sphere of its usefulness. We may here state that the New York horse-car companies have adopted homœopathic treatment, and find it a decided improvement, meeting with far fewer losses than before.

INFINITESIMALS.

The new British Pharmacopœia (allopathic) gives directions for a preparation of atropia disks, each containing 1-5000th grain of the alkaloid; and a favorite lotion of corrosive sublimate in ophthalmic hospitals contains one part of the salt to 50,000 parts of water.

Of the power of infinitesimal quantities of various substances to affect the physiology of plants and animals, Darwin has given abundant proof. One 20,000,000th of a grain of Phosphate of Ammonia he found sufficient to produce a distinct effect on the glands of *Drosera rotundifolia*. Further, Darwin says: "When a dog stands a quarter of a mile to the leeward of a deer or other animal, and perceives its presence, the odorous particles produce some change in the olfactory nerves; yet these particles must be infinitely smaller than those of the Phosphate of Ammonia, weighing the 20,000,000th of a grain. Dr. Blackley, in this work on Hay Fever, has proved that the 2,000,000th of a grain of Pollen is sufficient to set up the first symptoms of that disease."—*Homœopathic World*.]

COUNT MATTEI IN DIFFICULTIES.

The manufacturer of so-called "Electro-Homœopathic" remedies, Count Mattei, is condemned to pay a fine of 400 francs, damages of 2000 francs to each of the plaintiffs, Prof. Giordan of Genoa and Dr. Natili of Munich, for his libels respecting these gentlemen. In addition to this, the Tribunal of Commerce in Geneva has condemned him to pay 34,672 francs to the apothecary Sauter, of that town, together with the costs of the civil process. It is quite probable that the noble inventor of "Electro-Homœopathy" deserved his punishment, but considering the immense profits he must have made by the sale of his wonderful remedies, we have no doubt he can afford to pay for his amusements.—*Homœopathic World.*]

A CHINESE edition of "Gray's Anatomy," prepared by Dr. John Dudgeon, who has resided in China for over twenty years, has been published, and some curiosity is felt to learn in what manner the Celestial mind will welcome the overturn of his cherished anatomical principles. It will certainly be a startling awakening that he must undergo should the classic "Gray" approve itself to him, and it is an encouraging fact that a work so opposed to professional opinion in the Empire has been permitted to appear.

PRINCE BISMARCK AND HIS PHYSICIAN.—For the following anecdote the editor of that curious medley of disloyalty and servants'-hall gossip, miscalled *Truth*, is responsible:

"A good story is told of Prince Bismarck and his favorite doctor. It was at Karlsbad where they first met. The Prince feeling unwell sent for Dr. Schweininger, who began to put all sorts of questions to him. At last the Prince lost his temper, and exclaimed, 'What are you driving at, doctor?' Nothing disconcerted, the latter replied, 'I am at your orders, Prince; but if you wish to be treated without being questioned you had better send for the veterinary surgeon, who is accustomed to physic in that way.'"

SOME of the more radical members of the old school have already learned the virtue which resides in minute doses of mercury for dysentery, although they are careful to conceal the source of their inspiration. But the day will come when the credit will be awarded where it is due. In time the entire medical world will acknowledge its debt to Hahnemann. It will not be tomorrow nor yet next week—but a hundred years from now. When I reflect how young we are as a school, I am not surprised that homœopathy has not obtained universal recognition. In Germany and in France men are still living who were Hahnemann's patients. Only a few years ago there died in your city the man who was the first in America to espouse the cause of homœopathy. And yet we are asked if homœopathy is true, why does it not conquer the world? Have patience; we *are* conquering the world. In this short time the wonder is not that we have not done more, but that we have accomplished so much!—*American Homœopath.*

CARRYING the war into Africa is the watch-word spoken by the *New North American Journal of Homœopathy*, which we heartily endorse. Says that excellent journal: "There are some men who consider the delivery of pills, prating of ills, and collection of bills, as comprising all of a physician's duties. They acknowledge no allegiance to the profession, for they refuse to aid it. Self-interest rules, to the exclusion of all else. We have too many such men enrolled among us. Energetic, active, workers are few. While we slumber the Old School scientifically and progressively steals our remedies, adopts our methods, and is elbowing itself into our place, by the process of substitution. Our adversaries are united, prompt and jealous. In short, they are aggressive, while we are on the defensive; energetic, while we are sluggish. No cause however good, will triumph without hard fighting. Just now Homœopathy needs some stalwart warriors who will carry the war into the enemy's camp."

DEFINITION of the term "Regular Physician," as adopted by the oldest national medical society in the United States, the American Institute of Homœopathy:

"A regular physician, a graduate of a regular chartered medical college. The term also applies to a person practicing the healing art in accordance with the laws of the country in which he resides."

IN regard to the usefulness of inoculation with rabies-poison as an antidote and preventive against the effects of bites by mad dogs, homœopathy, as far back as 1849, had its PASTEUR. To DR CONSTANTINE HERING, the father of homœopathy in America, belongs the honor of first teaching it. In "Jahr's Clinical Guide," an old manual of homœopathic practice, is an article on the subject.

READERS of the *U. S. Medical Investigator* will find an interesting article, by DR. W. A. DEWEY, on "How I Treated Erysipelas," in the December number. Look it up and read it.

Popular Department.

THE DECAY OF HOME LIFE.

[PROF. GOODELL'S LECTURE. Continued from January Number,]

Apart from the great injury to health, which our system of education does to woman, it has another grave fault, and that is its publicity. The public examinations, the public recitations, the public exhibitions, and public commencements of every female school tell disastrously on our girls. This publicity teaches them how to face an audience, but not how to make a home. It gives them a self-consciousness which asserts itself in an unwomanly craving for the outside stir and heat of life, and not for the inside repose of home. They, indeed, "come out" while yet in short skirts, and entertain when they should yet be in the nursery.

In a thoughtful article, entitled the "Transitional American Woman,"* one of their sex says: "Women do not care for their homes as they did; it is no longer the focus of their endeavors; nor is the mother the involuntary nucleus of the adult children." Home is not now "the chief delight of the wife, who will be capable of finding pleasure and occupations in other avenues of interest. * * * The simple fact is that women have found that they can have occupations, respectability, and even dignity disconnected from the home. The tendency is that in the discovery of this possibility they are losing somewhat of filial tenderness, of the loyalty of kinship, and of close, concentrated affection, and acquiring more of self-assertion and universal expansiveness."

The family idea is, indeed, drifting into individualism. It is in danger of being lost in intense personality. Time was when woman felt that the deep import of her life was bound up in the home duties and home cares. The fireside was the

* Kate Gannet Wells, "Atlantic Monthly," December, 1880.

pivot around which her past, her present and her future revolved. Then she lived for others. Now she has weaned herself from the hearth-stone, and her chief end is self. Pray! what has brought about these changes? By the invention of the sewing machine, by the introduction of ready-made clothing, and by that damnable sin—the avoidance of offspring—our women are no longer compelled to stay at home—the home-tether is broken. But the publicity of their school education has awakened in them a taste for excitement. So the former give them the time, and the latter the bent, to hold “views,” to have “missions” and “objects,” and “cults.” These they champion with much zeal, but to the hurt of their home life. The fact is that, now-a-days, to foster domestic virtues, to cherish home and its surroundings, to be a true and helpful wife, a woman has to *surmount* her education.

THE UNWILLINGNESS OF OUR WOMEN TO BECOME MOTHERS.

The third and greatest danger of the hour embraces two sins, which defile every class of society—sins which, like the plague of the frogs, creep into our “houses and bed-chambers, and beds.” I refer to criminal abortion and the prevention of conception. They come from the dainty dilettanteism of our women, which shrinks from having its patrician pleasures disturbed by the cares of maternity. They come from fashion, from cowardice, from indolent wealth and shiftless poverty. They come from too high a standard of living, which creates many artificial wants, and demands many expensive luxuries. Of course, immorality has much to do in begetting them; but while regarding all these practices as grossly sinful, I wish to leave out of consideration the question of immorality *per se*. It is not the immoral classes which I wish to reach; not those whose pleasures and profits come from vice, but the wives of our citizens—our fellow countrywomen—on whose good morals and good health depends the prosperity of our country, and yet who are unwittingly tainting body and tainting soul.

I am amazed at the very low standard of morality obtaining in the community on the sexual relations. So low, in-

deed, has it fallen that I have known clergymen committing these sins in their own families, and physicians of repute teaching their patients how to sin. To these detestable practices do I attribute, in a great measure, the general ill-health of our women. These flagrant sins I hold accountable for much, if not for most, of the wretchedness and misery of this land. Why is it, asks a layman, that "in the regions of the United States, otherwise most highly favored, nearly every woman under forty is sick or sickly?"* Why is it, I ask that the waiting rooms of our gynecologists are crowded with so many querulous and complaining women—women with backaches and headaches and spineaches; women either without sexual feeling or too weak to indulge in it? Why do so many women break down either shortly after marriage or very soon after the birth of their first child? It is, I answer, because the great majority of them, false to their vows, false to their moral and physical obligations, are trying either not to have children or to limit their number. It is because, by an immutable law of nature, there are no harmless ways in which gestation can be interrupted or conception shunned. It is because the wife, sinning the most and most sinned against, suffers the most.

Be the mode of prevention what it may, so much engorgement and hyperplasia and disorganization of the uterine structures and annexes† take place in those women who keep themselves sterile, that their health breaks down, and they lose all sexual desire. Then, when they advance in life and there comes that inevitable desire for offspring, they find to their dismay that they cannot conceive. What physician of ripe years is there within the sound of my voice, who has not been begged by women, once wilfully barren but now longing for children, to undo the mischief caused by such practices?

But there is yet another side to this subject. Statistics show that divorces are multiplying in this land in far greater ratio than the increase of population. In New England the increase is so alarming as to arouse the attention of patriots

* Preface to Essay on "Drinking and Smoking," by J. Parton.

† A large percentage of my ovariectomy cases have been in women who were resorting to preventive measures.

and philanthropists, who have formed a "Divorce Reform League." At the New Hampshire General Association, the Rev. S. P. Leeds, D. D., of Hanover, N. H., read a paper in which he showed that in New England there is one divorce to every twelve marriages—a proportion even greater than that in France during the general break-up of law, religion and society, attending the French Revolution.† Dr. Nathan Allen, of Lowell, Mass., in an able essay on the subject,‡ proves that, excluding the marriages of Catholics, who are rarely divorced, "the true ratio of divorces to marriages stands thus, omitting (fractions): In Massachusetts, one to fifteen; in Rhode Island, one to nine; in Connecticut, one to eight, and in Vermont, one to thirteen." He shows further, that since 1860 the increase in Vermont and Connecticut has been nearly one-third. In Massachusetts, the heart of New England, the increase is more than double. Thus, in 1860, there was in this State one divorce to fifty-one marriages; in 1880, one divorce to 21.4 marriages.§ From a lecture delivered last January in Tremont Temple, Boston, by the Rev. Samuel W. Dyke, of Royalton, Vt., I glean that in 1878, by loose laws and loose court practice, the divorces granted in the New England States broke up 2,113 families, and dissolved the marriage tie between 4,226 persons.|| But these figures do not tell the whole tale of disrupted households, for mind you, they do not include the many cases of voluntary separation between husband and wife, or of the applications for divorce which were denied. While admitting that so high a divorce rate does not, thank God ! prevail in other States, yet so far as I can judge without positive knowledge, for very few States collect statistics on this point, it is, to our shame, steadily increasing all over the Union. For instance: In the year 1880 there were 830 divorce suits begun in the Chicago courts—that is to say, one application for di-

† *The Congregationalist*, Boston, September 22, 1880.

‡ *The North American Review*, June, 1880.

§ *Report on the Statistics of Labor for the Commonwealth of Massachusetts*, 1890, p. 234.

|| *Facts as to divorce in New England*. *The Evening Traveler*, Boston, Tuesday, January 25, 1880.

orce to every eight marriages.* In a recent divorce suit, which took place in New York City, Justice Lawrence asserted from the bench that there was collusion in one-half these suits, and that their increase was a subject of "serious alarm."† In some of the Western States, indeed, the ease with which divorces are granted has led to an influx of strangers, who go there not to settle, but to become unsettled.

Now, why are there so many ill-sorted marriages? Why these unhappy homes and broken households? What mean these separations between husband and wife? I answer: They mean the violation of one of Nature's immutable laws. Sex is a profound fact which underlies all the relations of life and the fabrics of society, and it cannot be ignored. The sexual instinct is given to man for two reasons—to perpetuate the species and rivet the tie between husband and wife, not only by offspring but by mutual endearment. The conjugal relation is therefore two-fold in its nature; it has a moral as well as a physical expression, but so interwoven that it is impossible to dissociate the one from the other, without doing moral as well as physical harm.

The causes of domestic infelicity and ill-sorted marriage are then, to my mind, clear enough. The grossness of the carnal union is redeemed by its purpose—the moral union in which is involved the desire for offspring. Deprive the marriage tie of these qualities, strip it of the family idea, and it loses its cohesiveness in intense personality and self-asserting individualism. Now, when a wife is too sickly to admit the approaches of her husband or respond to them; when she receives them on sufferance, or absolutely refuses to entertain them, as I have known many a wife to do; when she soils the marriage bed with the artifices and equipments of the brothel, and quenches all passion by cold-blooded safeguards; when she puts off an ardent husband to stated times and seasons; when, a wife, I say, behaves in so unwifelike a way, can it be otherwise than that estrangement or jealousy should take place? Can a home with such environment be

* *The Congregationalist*, March 2, 1881, also *The New York Daily Tribune*, April 4, 1881.

† *Ibid.*, March 26, 1881.

a happy one? Would not most husbands be tempted to seek elsewhere for those pleasures which are denied them at home? These are nature's reprisals; these, indeed, her never-failing retributions.

VETERINARY HOMŒOPATHY.

(From the *J. du Dispens. Hahnem.*)

1. A Hungarian horse shows the following symptoms: It refuses to drink and to eat, stamps the ground, throws himself down to every motion, his abdomen is greatly bloated, moans pitifully, looks at all sides, does not defecate, copious perspiration covers the skin. *Chamomilla*, 6th, 3 drops in a pint of water. It took only half of the medicine, before it was well again.

2. Another horse suffers in the same stable from urinary retention; moans at every motion. One dose *Cantharis*, 6th, in some water, sufficed a cure.

3. Three sheep came home from grazing in a meteoristic state. One bursted before anything could be done for it. The other two got *Colchicum*, 6th, and are well in half an hour. Other sheep were cured with the same remedy at different farms.

4. A horse, frightened by a whip, ran against a wall and drove an iron spike into his right side. After two hours the right shoulder was greatly swollen, the horse literally walks only on three legs. *Arnica* internally and the tincture diluted with water externally. Next day great amelioration, and on the third day the horse could be used again.

5. A hound got during the chase a shot in his left side and fell over. The wound bled a little, the animal limped and moaned. With difficulty he was brought home. Next day he refused food, the nostrils were dry and full of hard crusts, oppression, thirst, cough. A pleurisy could be made out easily. *Arnica* and *Aconite*, alternately, first in the 6th, then in the 12th dilution, restored the animal in 5 days.

6. A 7-months pup has the so-called dog-disease: no appetite, great malaise, lachrymation, extreme lassitude of the extremities, so that he falls backward every minute. *Rhus*, 6th, and *Rhus*, 30th, removed all symptoms in a few days.

7. Three cows, who had calved in April, had retained the placenta for two days, two of them showed not the least lochial discharge. *Pulsatilla* delivered them quickly from the placenta. Another cow suffered from extreme flatulency, but *Colchicum* quickly drove the flatulency off, although she was nearly suffocating.

8. A draft-horse suffered from conjunctivitis in consequence of a contusion. *Arnica* cured.

REMEDIES FOR CHILDREN.

Think of *Sulphur*, when there is redness of the margins of the lids; the child dislikes to be washed; it sleeps by short naps only; soreness results from the stools.

Opium will help when child is drowsy and stupid, with eyes half open—bowels constipated, little hard balls.

Kreosot will relieve cases in which the gums are bluish red, very painful and bleed easily, and the teeth decay almost as soon as they appear. Eyes smart and discharge hot tears, and are surrounded by dark rings.

Chamom is suited for the restless, peevish children with one red cheek and the desire to be walked. Fights and is surly. Stools like *chopped eggs*.

Psorinum, when sulphur was indicated and did not fully cure the case; the child has much roughness on skin of face—eruption on forehead, with a special spot above the nose, and stools that are very offensive.

Cicuta. Sometimes children have honey-combed scabs, especially on chin, but also on other parts. They burn when touched. Then *cicuta* will help.

Gelsem. In high fever, with a general crimson hue of the face and sleep disturbed now and then, as if by dreams and mumbling; or sudden sharp cries, as if from neuralgic pains.

Belladon. for constant, apparently causeless crying and screaming; wild looks, starting in sleep, sudden pains, with flushed face. Sometimes indicated, yet does not help altogether to remove symptoms, then follow with

Magnes. phos, especially when there is colic, loose bowels, tendency to spasms.